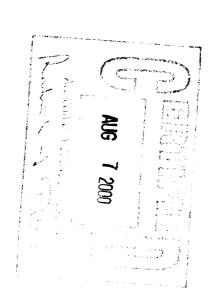
Entered- 7-16-97 - sb CL97L0407 -Dobbs Jordan

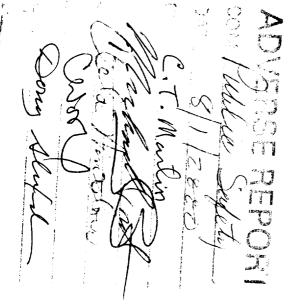
CLAIM OF: Carlton George
176 Anderson Avenue
Apartment B-1
Atlanta, Georgia 30314

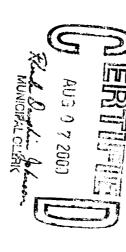
For damages alleged to have been sustained as a result of a property damage on June 18, 1997 at 518 Pierce Avenue, NW.

THIS ADVERSED REPORT IS CONSENT AGENDA APPROVED



BY: ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY





AVE 311 AUG 07 2000

## August 28, 2000

Carlton Geoerge 175 Anderson Ave. Apartment B-1 Atlanta, GA 30314

00-R-1166

Dear Mr. George:

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on August 07, 2000. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the City Attorney's Office/Claims Division at (404) 330-6400.

Sincerely,

Rhonda Dauphin Johnson, CMC Municipal Clerk

cc: Claims Division/Law Department

## DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 00L0407	Date: <u>June 24, 2000</u>
	-
Claimant Winting C. 1. C.	
Claimant / Victim Carlton George	
BY: (Atty) (Ins. Co.) Address: 176 Anderson Avenue, Apartment B-1 Atlanta	C: 20214
Subrogation: Claim for Property demage \$ 259	1, Georgia 30314
Date of Notice: 6-20-97 Method: Writter	n Proper V Improper
Subrogation: Claim for Property damage \$ 358.  Date of Notice: 6-20-97 Method: Writter  Conforms to Notice: O.C.G.A. \$36-33-5 X  Date of Occurrence 6-18-97 Place: 5  Department Public Works Division Sewer Operations in worked Property damage \$ 358.  A property damage \$ 358.  Method: Writter  Conforms to Notice: O.C.G.A. \$36-33-5 X  Date of Occurrence 6-18-97 Place: 5	Anta Litam (6 Ma)
Date of Occurrence 6-18-97 Place: 4	18 Pierce Avenue NW
Department Public Works Division Sewer Or	perations
Employee involved Disciplinary Action:	vertutions
NATURE OF CLAIM: Claimant alleges that his vehicle s	ustained property damage when a manhole cover which
was dropped by City workers, struck his parked vehicle.	The City of Atlanta is immune from liability as set forth
in O.C.G.A.§ 36-33-1. Additionally, the claimant has abar	ndoned his claim.
_	
INVESTIGATION:	
Statements: City employee Claimant	Others Written Oral
Pictures Diagrams Reports: Police	Dept Report Other X
Traffic citations issued: City Driver	Claimant Driver
Citation disposition: City Driver	Claimant Driver
DACIC OF DECOMMENDATION	
BASIS OF RECOMMENDATION:	
Function: Governmental V	Ainistorial
Function: Governmental X More than Six Months More than Six Months	Other Demogra researchis
City not involved Offer rejected	Compromise settlement
Renair/renlacement by Ins. Co.	Penair/ranlacement by City Foress
Repair/replacement by Ins. Co City NegligentJoint_	Claim Abandoned V
on the state of th	Claim AbandonedX
	Respectfully submitted,
	THE WATER TO THE PARTY OF THE P
	Coop III W
	INVESTIGATOR - DOBBS JORDAN
	•
RECOMMENDATION:	
	count charged: 1A012J012H01
Claims Manager:	Concur/date 02-28 ev
Committee Action:	Council Action
/	

FORM 23-61

	2/- 1/2/1/2
CLERK OF COUNCIL  ENTERED - 7/16/  97L0407 - ANTHO  Atlanta, GA 30335	97 - tew CLAIM FUR DAMAGES Outs NY G. OATIS TODAY'S DATE: 6-18-97 06/26
contend the City is liable.	Atlanta that I have suffered damages in or \$ bodily injury for which I
1. Date of incident: 6 - 18 - 9 (month day yes 3. Location of incident: 518 p	2. Police called (yes) (No) ierce Ave. NW Atl. GA. 30318
4. Name of your insurance company	
5. State what and how incident occu	
IN CRIMINAL PROSECUTION!  7. The registered owner must make t	(use other side if necessary)  JBJECT TO INSPECTION. THE MAKING OF  YOUR CLAIM BEING DENIED AND MAY RESULT  the claim for vehicle damages.  ched two (2) estimates of repair.
Your vehicle:  (make) (year)  City vehicle: (make) (dr	(tag#) (driver's name)
8. Witness:	
9. The acknowledgment of this claim Immunity of the City of Atlanta, an admission of liability on behits employee(s).	([
10. THIS CLAIM SHOULD BE MAILED IMMEDIATELY TO THE ADDRESS SHOWN ABOVE	Carlton George (SEAL)  (claimant)  518 pierce Ave  (address)  Atlanta GA. 30318  (city) (state) (zip)
[] [ [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [	Atlanta GA. 30318 (city) (state) (zip) (404) 815-9867 (home) (phone) (work)
REV 2/84 JWENTUNIC.PAL CLERK	
00- <sub>C</sub> -1166	